	PATENT	DRE	Application of Docket Number 10/785, 9.6 4										
CLAIMS AS FILED - PART I SMALL ENTITY													
_			(Colum	n 1)	(Col	(Column 2)		TYPE		OR	OTHER THA		
L	OTAL CLAIMS	3	20	20				RATE	FEE	7	RATE	FEE	
F	OR		NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FI	EE 385.00	ÒR	BASIC FEE	770.00	
T	DTAL CHARGE	ABLE CLAIMS	20 mi	20 minus 20=		. 9-		XS 9=	T.	OR	XS18=		
IN	DEPENDENT C	ZAIMS	10	U minus 3 =		. 6		X43=	1	OR	X86=	$\vdash$	
M	ULTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	1	7		<del> </del>	
•1	the difference	e in column 1 is	less than z	ero, enter	**************************************	Cohima 2				JOR		<b>├</b> ──	
CLAIMS AS AMENDED - PART II								TOTAL	· L	JOR			
2	124/04								SMALL ENTITY OR SMALL ENTITY				
V		CLAIMS REMAINING		HIGHE	EST		Ì		ADDI-	7		ADDI-	
EN		AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
AMENDMENT	Total	. 20	Minus	- 2	0			X\$ 9-		OR	X\$18=		
AME	Independent	1. 2	Minus	•••	3	-		X43=		OR	X86=		
L	FIRST PRESE	ENTATION OF ML	JETIPLE DEI	PENDENI	CLAIM			+145=	1.	1	+290=		
								+145=		OR	TOTAL	<u> </u>	
		A	DDIT. FEE	- 1	JOR ,	ADDIT FEE							
_	T 1 1	(Column 1)		(Colum		(Column 3)	, ,			• (			
AMENDMENT B	5/11/05	REMAINING AFTER AMENDMENT		PREVIOUS PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total	. 12	Minus	- 2	0	• 0:		X\$ 9=		OR	X\$18=		
AME	Independent	• /	Minus .		3	· 0.		X43= ·	1.	OR	X86=	·	
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										.000		
								+145±	<u>   </u>	OR	+290= TOTAL		
								DOIT. FEE	لبا	OR ,	ADDIT. FEE	<u>.</u>	
	<del></del>			•		•	•						
AMENDMENT C	<u> </u>	CLAIMS REMAINING AFTER AMENDMENT		MIGHE NUMBI PREVIOU PAID FO	er Usly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE	
Ş	Total	•	Mimus	**			Γ	X\$ 9=	= =	OR	X\$18=		
ME	Independent	•	Minus	•		•	H	X43=		. 1	X86=	•	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (	CLAIM		-	A43=		OR	. 7003		
• #	4 If the entiry in column 1 is less than the entry in each one 2 water and in enhance 4								·	OR	+290=		
	"If the entry in column 1 is less than the entry in column 2, write "O" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE  ADDIT. FEE												
7	he 'Highest Num!	ber Previously Paid	For (Total or	Independent	n) is the l	highest number	found	f in the app	propriete box	th cobs	mn 1.		

FORM PTO-875 (Rev. 10/03)

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